CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

3543 FORM C/OH COVER SHEET PG 1

- The C/OH INSTRUCTION	Guide explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER NAME	MS DOLORES NICHUME LAST ORTEGA CARTER	MI SUFFIX	iesa <u>ie⊒isi≾onk</u> r * ∤i	
4 CANDIDATE / OFFICEHOLDER ADDRESS Change of Address	ADDRESS / PO BOX: APT / SUITE #: CI 4703 GANYMEDE DR. AUST	ITY; STATE; ZIP CODE TIN -TX 78727		
5 CAMPAIGN TREASURER NAME	TITLE FIRST ALFRED NICKNAME LAST HERRERA	MI SUFFIX	HD / PN Amount Date Paggessed	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUI	AUSTIN TX	78727-13-3 B	
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 835-7802	EXTENSION		
8 REPORT TYPE	January 15 30th day before election X July 15 Bth day before election		15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)	
9 PERIOD COVERED	Month Day Year THRO	OUGH O6 30	/ 97	
10 ELECTION	ELECTION DATE ELECTION TY Month Day Year Primary		General Special	
11 OFFICE	OFFICE HELD (# any) TRAVIS COUNTY TREASURER	12 OFFICE SOUGHT (4 know	m)	
13 DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS	Direct campaign expenditures are campaign explicandidates are required to disclose this information. Name	only if they receive notification of the dir	ndidate's prior consent or approval. act campaign expenditure. ••	
addnional pages	Address / PO Box; Apt. / Suite #, City; State,	Zup Code		
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME	OLORES ORTEG		15 ACCOUNT # (Ethics, Commission filers)	
16 SUPPORTING POLITICAL COMMITTEE(S)	→ This listing includes political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.			
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
additional pages	1			
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 NO REPORTABLE ACTIVITY	X Check here if no reportable activity occurred during this reporting period. (Sign affidave below and submit pages 1 and 2 only)			
18 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$	
	2. TOTAL	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED		\$	
	4. TOTAL	POLITICAL EXPENDITURES	\$	
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		HE \$	
19 AFFIDAVIT	<u> </u>			



RHONDA AMBROSE MY COMMISSION EXPIRES February 18, 1998

11.

I swear, or affirm, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworm to and subscribed before me, by the said Dolores Ortega Carter, this the 14th day of July

19 \boxed{q} , to certify which, witness my hand and seal of office.

Khonda Ambrose
Print name of officer administering oath

Notary Public